DEPARTMENT OF SOCIAL SERVICES

744 P Street, Sacramento, CA 95814



July 1, 1991

ALL-COUNTY LETTER NO. 91-57

TO: ALL COUNTY WELFARE DIRECTORS
ALL COUNTY GAIN COORDINATORS

SUBJECT: UPDATE ON THE DUES SUBSIDY PROGRAM/TRANSITION PLAN OFFERED BY KAISER PERMANENTE OF CALIFORNIA FOR FORMER

GAIN PARTICIPANTS

REFERENCE: All-County Letter (ACL) 90-53, Department of Health

Services Letter No. 91-57

The purpose of this letter is to remind and encourage those Counties in the Kaiser Permanente service areas (see Enclosure 1) to inform their current Greater Avenues for Independence (GAIN) participants of the subsidized medical care coverage program offered by Kaiser Permanente for former GAIN participants. This program is known as the Dues Subsidy Program (DSP) for Kaiser Permanente of Northern California and the Transition Plan (TP) for Kaiser Permanente of Southern California. These former participants must have been terminated from Aid to Families with Dependent Children (AFDC) due to obtaining unsubsidized employment and their employer must not contribute to health care coverage. (Detailed eligibility requirements are listed in ACL No. 90-53, also enclosed.)

During the past twelve months, many Counties have expressed a concern that former GAIN participants could forget any information provided to them regarding the Kaiser Program due to the twelve-month Transitional Medi-Cal (TMC) eligibility period available upon termination from AFDC. However, there are those participants who will not be eligible for TMC and would need to rely on information provided by the GAIN Program. In addition, although the majority of GAIN participants are not likely to be eligible for DSP/TP immediately, knowledge of eventual eligibility for this program may alleviate their fears that no health care coverage or exorbitant health care premiums await them at the end of their TMC period. Providing this information to participants may encourage them to remain employed and to continue to work towards self-sufficiency without fear of loss of health care coverage.

GAIN PROGRAM RESPONSIBILITY

As noted in the information provided previously, County GAIN Program staff are responsible for informing GAIN participants of the availability of the DSP/TP. This can include distributing informational brochures developed by Kaiser Permanente, presentations, mailouts, verbal notification, etc. Several Counties have already mailed out notices to those participants who obtained employment prior to the implementation of the twelve month TMC Program; some have incorporated the DSP/TP information in their orientation process.

MEDI-CAL PROGRAM RESPONSIBILITIES

County Medi-Cal staff will provide information to participants terminating from TMC. Additional instructions will be provided to County Medi-Cal staff by the Department of Health Services.

KAISER PERMANENTE RESPONSIBILITIES

Kaiser Permanente will continue to provide postcards, literature, presentations as requested, etc. to Counties. Kaiser Permanente will also work individually with Counties to help determine the most workable method of disseminating information to former participants. For example, Kaiser Permanente of Southern California has been working with the local Medi-Cal office in developing a Los Angeles-specific flyer for distribution to all individuals being discontinued from twelve month TMC or who do not qualify for TMC.

PARTICIPANT RESPONSIBILITIES

The participant continues to be responsible for contacting Kaiser regarding the DSP/TP and providing any needed verification for eligibility.

CONTACT PERSONS

Please contact the Kaiser Permanente representative responsible for your service area if you have any questions regarding the DSP/TP. For questions concerning the overall implementation of this program, please contact the appropriate Medi-Cal or GAIN Operations person listed below:

Ms. Nancy Shemick, (415) 987-4409 Kaiser Permanente-Northern California

Ms. Maritza Larreta-Moylan (818) 405-5734 Kaiser Permanente-Southern California

Ms. Sylvia Finberg, (916) 323-4129 State Department of Health Services, Medi-Cal

Ms. Jessie Mar, (916) 323-3969 State Department of Social Services, GAIN Operations

DENNIS J. BOYLE Deputy Director

cc: CWDA

Enclosures

Eligible Service Area Zip Codes (September 1989)

The Service Area

The following counties lie entirely within the service area:

- San Francisco San Mateo Contra Costa Alameda
 - Marin

Solano

Sacramento

Only certain Zip Codes in the following counties lie within the service area:

- San Joaquin Santa Clara Sonoma El Dorado Amador Fresno
 - Tulare Suffer
 - KingsMadera
- Napa
 Placer

quirements and are excluded from our service area. All APOs and FPOs in the 96000 series of Zip Codes do not meet our residence eligibility re-

Solano County		94512 95620	94533 95625	94535 95647	94571 95688	94585		Sonoma County	94922.23 95436			94951.54 95444		94975 95448	95401:09 95450	95413 95452		95419 95465		95425 95476	95430-31 95486-87	95433 95492			•	r Cour			95668 95687		Tulare County	93618 93673	93666		Yolo County	95605 95645			95616-18		V I		95692 95961	95903
San Francisco So	County 94			76	76	San Joaquin 94	County	95290	95297	95304	31 95320	95330-31	37 95336	95366	95253 95385 9	95258 95686 9	95269 9	0	6		San Maleo	County	94002 94044		94010-11 94070	94014-21 94074	94025-26 94080 9	94027-28 94083 9	94097-99	94037-38 94401-99	,		Santa Clara	County	, 62056	95030-32	43 95035	95037-38	95042		60	95011 95050-55		95020-21 95101-99
Madera County Sar	93645		Marin County	15 94945-50		25 94960	94963-66	94970-71	94973-74		Napa County 952	94573-74	94576	94581	94599			mos '	04	95681	95/03	95722	95736	95746	Sacramento County 94	_	95626	9552B	95630	35 95632	94239-40 95638-39		95652	_	95662	95670-71	95673	74 95680	95683	95690	95693	95741-42	95758-59	95800-99
Alameda County Made	94568	46 94577.80	94582	94584	04586-88	94601-99	94701.99				95640 95669 Napa	94508	Contra Costa County 9/1515	0458-59	94563-65		94572	14 94575	94583	94547-49 94593-98 95648	94801-99			95663		14 95651	95664	9566/	956/2	95633-35 95662 5.50 64643 64727 9423	13.00	Fresho County	18.52	93654	07 93656-57	93660		93616 93667-68 9427	93675		93646 93844-88 9429		Kings County 95615	93230 95621

Kernanc are County Zip Codes

93205 93 93206 93 93215 through 93217 93 93220 93 93224 93 93226 93	240 241 250 through 93252 261 263 268 276 280	93285 93267 93300 through 93399 93518 93531 93561 93581 93582
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Riverside County Zip Codes

91708	92337	92381
91718 through 91720	92340	92383
91752	92343	92387
91760	92344	92388
92220	92348	9 23 95
92223	92353	92396
92303	92360	92500
92313	92362	92501 through 92508
92320	9 <u>23</u> 67	92510 through 92599
92330	92370	•
92331	92380	

San Fernardino County Zip Codes

91701	92318	92359
91709	92321	92369
91730	92322	92371 through 92374
91739	92324	92376
91743	92325	92378
91759	92329	92382
91761 through 91764	92333	9 23 85
91786	92335	9 23 86
92303	92339	92391
92305	92341	92392
92307	92345	92398
92308	92346	. 92399
92310	92352	92400 through 92416
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92314	92354	92418
92315	92356	
92317	92358	

San Diego County Zip Codes

92001	92040	92083
92002	92041	92093
92007	92045	92100 through 92129
92008	92047	92131
92010 through 92012	92048	92133 through 92140
92014	92050	92145
92016	92053	92154
92017	92054	92155
92019 through 92022	92056	92161
92024 through 92027	92062 through 92065	92162
92031	92067 through 92071	92173
92032	92073	92177
92035	92075	92182
92037	92077 through 92080	
92038	92082	

Los Angeles County Zip Codes

90001 through 90073	91020	91461
90077	91023	91462
90175	91024	91463
90201 through 90296	91030	91470
90301 through 90313	91040	91475
90401 through 90406	91042	91478
90501 through 90505	91046	91500 through 91508
90507 through 90510	91100 through 91111	91510
90513	91114	91516
90522	91123 through 91126	91520
90524	91131	91521
90601 through 90610	91200 through 91211	91523
90612	91213 through 91216	91600 through 91609
90637	91218	91702
90640	91222	91 7 06
90650	91223	91711
90651	91231	91722
90660	91242	91723
90670	91243	91724
90701	91260	91731 through 91734
90704	91266	91740
90706	91267	91744 through 91750
90710	91270	91754
90712 through 90717	91274	91 76 5 through 91770
90723	91277	91773
90731 through 90733	91280	91775 through 91778
95744 through 96746	91301 through 91307	·1780
90800 through 90810	91310	91769
90812 through 90818	91311	91790 through 91793
90820	91316	91801 through 91808
90822	91321 through 91328	91810
90823	91330 through 91332	91870
90826	91335	93510
90827	91340 through 91346	93513
90831	91350 through 91352	93532
90840	91355	93534
90844	91356	9 353 5
90848	91364 through 91368	93536
90910	91400 through 91416	9353 9
91001	91423	93543
91002	91426	93544
91006	91430 through 91436	93550
91007	91440	93553
91010	91443	93563
91011	91446	
91016	91450	

Orange County Zip Codes

90620 through 90624	92605	92686
90630	92614	92690 through 92693
90631	92621	92701 through 92710
90680	92624 through 92638	92711 through 92720
90720	92640 through 92653	92726 through 92728
90740	92655	92730
90742	92660 through 92669	92801 through 92803
90743	92675 through 92678	92806
90805	92680	92807
92601	92683	93670

DEPARTMENT OF SOCIAL SERVICES 744 P Street, Sacramento, CA 95814



June 22, 1990

All-COUNTY LETTER NO. 90-53

TO: ALL COUNTY GAIN COORDINATORS
ALL COUNTY MEDI-CAL LIAISONS

SUBJECT: MEDICAL DUES SUBSIDY PROGRAM PROPOSED BY KAISER PERMANENTE OF NORTHERN AND SOUTHERN CALIFORNIA FOR FORMER GREATER AVENUES FOR INDEPENDENCE (GAIN) PARTICIPANTS

The State Department of Social Services (SDSS) and the State Department of Health Services have been working together to determine the feasibility of implementing a Medical Dues Subsidy Program proposed by Kaiser Permanente of Northern and Southern California for former GAIN participants. The purpose of this letter is to provide a general overview of this program and to provide guidelines for its implementation.

OVERVIEW

During the January 1990 meetings of the GAIN Technical Subcommittee, GAIN Committee of the County Welfare Directors Association (CWDA), and the March 1990 session of the Medical Care Committee of the CWDA, the Dues Subsidy Program for medical care offered by Kaiser Permanente was discussed. Committee members expressed a great deal of interest in implementing such a program. This Dues Subsidy Program, known in Southern California as the Transition Plan, is intended to subsidize health plan membership dues for former GAIN participants who have been terminated from Aid to Families with Dependent Children (AFDC) due to obtaining unsubsidized employment and whose employer does not contribute to health care coverage. Kaiser Permanente is offering this program to all former GAIN participants who meet the eligibility criteria listed under the Dues Subsidy Program Eligibility section below.

DUES SUBSIDY PROGRAM ELIGIBILITY

This program will enable clients to receive medical care coverage either free of charge or for a small portion of regular membership dues according to a sliding scale. In order to be eligible for this program, the client must:

- o have been a GAIN participant:
- o have terminated AFDC due to unsubsidized employment (increased hours of employment, increased wages, etc.);
- o have terminated from Transitional Medi-Cal (TMC) or not be eligible for TMC;
- o meet Kaiser Permanente's income and assets guidelines;
- o not have access to a health care coverage plan with employer contributions, and;
- o reside in a Kaiser service area.

GAIN PROGRAM RESPONSIBILITY

County GAIN Program staff in Kaiser service areas will be responsible for notifying the participant of the availability of the Dues Subsidy Program. This will include the following:

- o distributing informational brochures to GAIN participants regarding the availability of the Dues Subsidy Program at participant orientation and participant deregistration from GAIN due to employment;
- o informing former GAIN participants who deregistered from GAIN in Fiscal Year 1989/90 (prior to April 1, 1990), due to employment, of the availability of the Dues Subsidy Program. This can be accomplished by sending the participant the Kaiser-provided postcard.

MEDI-CAL PROGRAM RESPONSIBILITIES

Kaiser will not be able to enroll the client until verification of termination or ineligibility for TMC is received. Realizing that a maximum of one year may elapse between termination from AFDC and termination from TMC, Kaiser will provide postcards to Medi-Cal staff which will be sent to the participant. The intent of the postcard is to assist Kaiser in beginning a file for the potential Kaiser enrollee and to shorten the processing time once the participant is terminated from TMC.

Medi-Cal Eligibility Workers are asked to distribute the Kaiser brochure and postcard at the following times:

- 1. At the time the fourth month Status Report is sent.
- 2. At the end of the sixth month if the family is being discontinued from TMC.

- 3. At the time the seventh month Status Report is sent.
- 4. At the end of the twelfth month when TMC is discontinued.
- 5. Any time a family is discontinued from TMC.

KAISER PERMANENTE RESPONSIBILITIES

Kaiser will provide Counties with brochures which explain the program to participants and pre-paid postcards for participants to notify Kaiser of their interest in the program. Kaiser will determine eligibility (e.g., income and assets limits) for their program.

Kaiser has expressed an interest in beginning this program in July 1990. They have also offered to provide presentations to individual County Welfare Departments upon request.

PARTICIPANT RESPONSIBILITIES

The client is responsible for contacting Kaiser regarding the Dues Subsidy Program. The termination or denial notice of TMC will be the client's verification to Kaiser that they are no longer eligible for TMC benefits.

SERVICE AREAS

All members and their eligible dependents must reside within Kaiser Permanente's service area in order to be eligible to participate in the Kaiser Dues Subsidy Program. The enclosed list specifies which Counties and zip codes are currently in the Kaiser service area.

CONTACT PERSONS

Please contact the Kaiser representative responsible for your service area to answer additional questions you may have regarding the Dues Subsidy Program. The names of GAIN Coordinators and Medi-Cal Liaisons will be given to Kaiser Permanente for them to contact the Counties to work out further details (e.g., ordering brochures and postcards, providing presentations, etc.) For questions concerning the overall implementation of this program, please contact the appropriate Medi-Cal or GAIN Operations person listed below.

Ms. Nancy Shemick, (415) 987-4409 Kaiser Permanente-Northern California Ms. Lynn Meltzer, (818) 405-5734 Kaiser Permanente-Southern California

Ms. Kristi Allen, (916) 445-6855 State Department of Health Services, Medi-Cal

Ms. Jessie Mar, (916) 323-3969 State Department of Social Services, GAIN Operations

DENNIS J. BOYLE

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State Department of Social Services

Frank S. Martucci, Chief

Medi-Cal Eligibility Branch

State Department of Health Services

Enclosures

cc: Nancy Shemick Lynn Meltzer

CWDA